



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Mark A. Baloga
Carl V. Forslund III
Thomas G. Feldpausch

Title: UTILITY DISTRIBUTION
SYSTEM

Application No.: 10/026,964

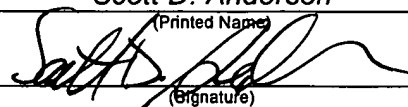
Filing Date: 12/21/2001

Examiner: Kevin McDermott

Art Unit: 3635

Atty. Dkt. No. 76507-421

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

<p>CERTIFICATE OF MAILING</p> <p>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231, on the date below.</p> <p><u>Scott D. Anderson</u> (Printed Name)</p> <p><u></u> (Signature)</p> <p><u>March 31, 2004</u> (Date of Deposit)</p>

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APR 09 2004

GROUP 3600

REPLY AND AMENDMENT

This communication is responsive to the Office Action dated January 31, 2004, concerning the above-referenced application.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this document.

Remarks begin on page 6 of this document.

Please amend the application as follows:

04/07/2004 HDAMTE1 00000114 10026964

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54.00 OP



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Atty. Dkt. No. 076507-0421

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Baloga et al.

Title: UTILITY DISTRIBUTION
SYSTEM

Appl. No.: 10/026,964

Filing Date: 12/21/2001

Examiner: USPTO_EXAMINER

Art Unit: 3632

<p>CERTIFICATE OF MAILING</p> <p>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to: Commissioner for Patents, PO Box 1450, Alexandria, Virginia 22313-1450, on the date below.</p> <p><u>Scott D. Anderson</u> (Printed Name)</p> <p><u><i>Scott D. Anderson</i></u> (Signature)</p> <p><u>March 31, 2004</u> (Date of Deposit)</p>

REPLY AND AMENDMENT TRANSMITTAL

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APR 09 2004

GROUP 3600

Commissioner for Patents
PO Box 1450
Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

[X] The fee required for additional claims is calculated below:

	Claims As Amended		Previously Paid For		Extra Claims Present		Rate		Additional Claims Fee
Total Claims:	30	-	27	=	3	x	\$18.00	=	\$54.00
Independent Claims:	3	-	3	=	0	x	\$86.00	=	\$0.00
First presentation of any Multiple Dependent Claims:						+	\$290.00	=	\$0.00
CLAIMS FEE TOTAL								=	\$54.00

- ☐ Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

<input type="checkbox"/> Extension for response filed within the first month:	\$110.00	\$0.00
<input type="checkbox"/> Extension for response filed within the second month:	\$420.00	\$0.00
<input type="checkbox"/> Extension for response filed within the third month:	\$950.00	\$0.00
<input type="checkbox"/> Extension for response filed within the fourth month:	\$1,480.00	\$0.00
<input type="checkbox"/> Extension for response filed within the fifth month:	\$2,010.00	\$0.00
EXTENSION FEE TOTAL:		\$0.00
<input type="checkbox"/> Statutory Disclaimer Fee under 37 C.F.R. 1.20(d):	\$110.00	\$0.00
CLAIMS, EXTENSION AND DISCLAIMER FEE TOTAL:		\$54.00
<input type="checkbox"/> Small Entity Fees Apply (subtract ½ of above):		\$0.00
TOTAL FEE:		\$54.00

- ☐ Please charge Deposit Account No. 06-1447 in the amount of \$54.00. A duplicate copy of this transmittal is enclosed.

- ☒ Check No. 13866 in the amount of \$54.00 is enclosed.

- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447. If any extensions of time are needed for timely acceptance of papers submitted herewith, applicant hereby petitions for such extension under 37 C.F.R. §1.136 and authorizes payment of any such extensions fees to Deposit Account No. 06-1447.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date 3/31/04

By 

FOLEY & LARDNER LLP
777 East Wisconsin Avenue
Milwaukee, Wisconsin 53202-5306
Telephone: (414) 297-5740
Facsimile: (414) 297-4900

Scott D. Anderson
Attorney for Applicant
Registration No. 46,521